

Dr. Vimmi Goel  
Head - Non Invasive Cardiology  
Incharge - Preventive Health Care  
MBBS, MD (Internal Medicine)  
Reg. No: MMC- 2014/01/0113  
7499913052



Name: Mrs. Neha patke Date: 9/9/23

Age: 30y Sex: M/F Weight: 54.5 kg Height: 151.2 inc BMI: 26.0

BP: 100/60 mmHg Pulse: 71/m bpm RBS: \_\_\_\_\_ mg/dl

SpO2: 100%

LMP 28/8/23



## CLINICAL DIAGNOSTIC LABORATORY

### DEPARTMENT OF PATHOLOGY

<b>Patient Name</b> : Mrs. NEHA PATKE	<b>Age /Gender</b> : 30 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324038939/UMR2324019589	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 09-Sep-23 09:02 am	<b>Report Date</b> : 09-Sep-23 12:39 pm

#### HAEMOGRAM

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	12.4	12.0 - 15.0 gm%	Photometric
Haematocrit(PCV)		39.6	36.0 - 46.0 %	Calculated
RBC Count		<b>5.46</b>	3.8 - 4.8 Millions/cumm	Photometric
Mean Cell Volume (MCV)		<b>73</b>	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		<b>22.8</b>	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		<b>31.4</b>	31.5 - 35.0 g/l	Calculated
RDW		<b>16.4</b>	11.5 - 14.0 %	Calculated
Platelet count		293	150 - 450 $10^3$ /cumm	Impedance
WBC Count		6000	4000 - 11000 cells/cumm	Impedance
<b><u>DIFFERENTIAL COUNT</u></b>				
Neutrophils		63.2	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes		32.0	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils		1.4	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes		3.4	2 - 10 %	Flow Cytometry/Light microscopy
Basophils		0.0	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count		3792	2000 - 7000 /cumm	Calculated



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		1920	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		84	20 - 500 /cumm	Calculated
Absolute Monocyte Count		204	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated
<b><u>PERIPHERAL SMEAR</u></b>				
RBC		Microcytosis +(Few), Hypochromia +(Few), Anisocytosis +(Few)		Light microscopy
WBC		As Above		
Platelets		Adequate		
<b>E S R</b>		05	0 - 20 mm/hr	Automated Westergren's Method
*** End Of Report ***				

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100499

Test results related only to the item tested.

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**Dr. PURVA JAISWAL, MBBS,MD,DNB**  
**CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. NEHA PATKE	<b>Age / Gender</b> : 30 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324038939/UMR2324019589	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 09-Sep-23 09:00 am	<b>Report Date</b> : 09-Sep-23 11:30 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	<b>106</b>	< 100 mg/dl	GOD/POD,Colorimetric
Post Prandial Plasma Glucose		92	< 140 mg/dl	GOD/POD, Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HBA1C)</b>				
HbA1c		<b>5.8</b>	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

\*\*\* End Of Report \*\*\*

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*Paiswal*

**Dr. PURVA JAISWAL, MBBS,MD,DNB**

SPANV Medical Research & Diagnostic Private Limited  
CONSULTANT PATHOLOGIST

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Phone: +91 0712 6789100

CIN: U74999MH2018PTC303510



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. NEHA PATKE	<b>Age / Gender</b> : 30 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324038939/UMR2324019589	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 09-Sep-23 09:02 am	<b>Report Date</b> : 09-Sep-23 11:30 am

**LIPID PROFILE**

<b>Parameter</b>	<b>Specimen</b>	<b>Results</b>	<b>Method</b>
Total Cholesterol	Serum	165 < 200 mg/dl	Enzymatic(CHE/CHO/PO D)
Triglycerides		67 < 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		50 > 50 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		<b>102.13</b> < 100 mg/dl	Enzymatic
VLDL Cholesterol		13 < 30 mg/dl	Calculated
Tot Chol/HDL Ratio		3 3 - 5	Calculation

<u>Intiate therapeutic</u>	<u>Consider Drug therapy</u>	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100	>130, optional at 100-129
Multiple major risk factors conferring 10 yrs CHD risk >20%		<100
Two or more additional major risk factors, 10 yrs CHD risk <20%	>130	10 yrs risk 10-20 % >130 <130
No additional major risk or one additional major risk factor	>160	10 yrs risk <10% >160 <160

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. Anuradha Deshmukh, MBBS,MD**  
**CONSULTANT MICROBIOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. NEHA PATKE	<b>Age /Gender</b> : 30 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324038939/UMR2324019589	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 09-Sep-23 12:14 pm	<b>Report Date</b> : 09-Sep-23 01:15 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	
<b>URINE SUGAR</b>			
Urine Glucose		Negative	
<b>THYROID PROFILE</b>			
T3		1.65	0.55 - 1.70 ng/ml Enhanced chemiluminescence
Free T4		1.26	0.80 - 1.70 ng/dl Enhanced Chemiluminescence
TSH		0.740	0.50 - 4.80 uIU/ml Enhanced chemiluminescence

\*\*\* End Of Report \*\*\*

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**Dr. Anuradha Deshmukh, MBBS,MD**

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Phone: +91-0712-6789100  
CIN: U74999MH2018PTC303510



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mrs. NEHA PATKE  
**Age / Gender** : 30 Y(s)/Female  
**Bill No/ UMR No** : BIL2324038939/UMR2324019589  
**Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 09-Sep-23 09:02 am  
**Report Date** : 09-Sep-23 11:30 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
<b>RFT</b>				
Blood Urea	Serum	15	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatinine		0.58	0.52 - 1.04 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		124.8		Calculation by CKD-EPI 2021
Sodium		141	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.59	3.5 - 5.1 mmol/L	Direct ion selective electrode
<b>LIVER FUNCTION TEST(LFT)</b>				
Total Bilirubin		0.80	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		<b>0.68</b>	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.12	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase		<b>145</b>	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT		27	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		24	13 - 35 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein		7.14	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum		4.37	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin		2.77	2.0 - 4.0 gm/	Calculated
A/G Ratio		1.58		

\*\*\* End Of Report \*\*\*

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**Dr. Anuradha Deshmukh, MBBS,MD**

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**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. NEHA PATKE	<b>Age / Gender</b> : 30 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324038939/UMR2324019589	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 09-Sep-23 09:24 am	<b>Report Date</b> : 09-Sep-23 11:30 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
<b>URINE MICROSCOPY</b>			
<u>PHYSICAL EXAMINATION</u>			
Volume	Urine	10 ml	
Colour.		Pale yellow	
Appearance		Clear	
<u>CHEMICAL EXAMINATION</u>			
Reaction (pH)	Urine	5.0	4.6 - 8.0
Specific gravity		1.015	1.005 - 1.025
Urine Protein		Negative	Indicators ion concentration protein error of pH indicator
Sugar		Negative	GOD/POD
Bilirubin		Negative	Diazonium
Ketone Bodies		Negative	Legal's est Principle
Nitrate		Negative	Ehrlich's Reaction
Urobilinogen		Normal	
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells	Urine	<b>11-20</b>	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	
Crystals		Absent	
<b>USF(URINE SUGAR FASTING)</b>			
Urine Glucose	Urine	Negative	GOD/POD

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100370

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**Dr. Anuradha Deshmukh, MBBS,MD**  
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Phone: +91 0712 6789100  
CIN: U74999MH2018PTC303510





**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF IMMUNO HAEMATOLOGY**

**Patient Name** : Mrs. NEHA PATKE  
**Age / Gender** : 30 Y(s)/Female  
**Bill No/ UMR No** : BIL2324038939/UMR2324019589  
**Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 09-Sep-23 09:02 am  
**Report Date** : 09-Sep-23 11:47 am

**BLOOD GROUPING AND RH**

**Parameter**  
**BLOOD GROUP.**

**Specimen** **Results**

EDTA Whole " B "  
Blood &  
Plasma/  
Serum

Gel Card Method

**Rh (D) Typing.**

" Positive "(+Ve)  
\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. PURVA JAISWAL, MBBS,MD,DNB**  
**CONSULTANT PATHOLOGIST**

**DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE**

NAME	NEHA PATKE	STUDY DATE	09-09-2023 10:18:03
AGE/ SEX	30Y 11M9D / F	HOSPITAL NO.	UMR2324019589
ACCESSION NO.	BH.2324038939-10	MODALITY	DX
REPORTED ON	09-09-2023 13:47	REFERRED BY	Dr. Vimmi Goel

**X-RAY CHEST PA VIEW**

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

**IMPRESSION:**

No pleuro-parenchymal abnormality seen.



**DR NAVEEN PUGALIA**

**MBBS, MD [076125]**

**SENIOR CONSULTANT RADIOLOGIST.**

N.B : This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness.

NAME OF PATIENT:	NEHA PATKE	AGE & SEX:	30 YRS/F
UMR NO	UMR2324019589	BILL NO:	BIL2324038939
REF BY:	DR. VIMMI GOEL	DATE:	09/09/2023

USG ABDOMEN AND PELVIS

LIVER is normal in size (13.6 cm) and echotexture. No evidence of any focal lesion seen. Intrahepatic biliary radicals are not dilated. PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it. Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size (9.5 cm), shape and echotexture. No focal lesion seen.

Right kidney measures 9.8 x 3.8 cm. Left kidney measures 9.7 x 4.4 cm. Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.


URINARY BLADDER is well distended. No calculus or mass lesion seen.

Uterus is retroverted and normal. No focal myometrial lesion seen. Endometrial echo-complex appear normal. ET - 7.7 cm.

No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen. ✓

**IMPRESSION:** USG reveals,  
No significant visceral abnormality seen.

  
DR. POOJA CHANDAK  
MBBS, DMRD, FMF (UK)  
Consultant Radiologist &  
Fetal Medicine Specialist  
MMC 2016030471

Kingsway Hospitals  
44 Kingsway, Mohan Nagar,  
Near Kasturchand Park, Nagpur

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: Mrs. Neha , Patke  
Patient ID: 019589  
Height:  
Weight:  
Study Date: 09.09.2023  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

DOB: 01.10.1992  
Age: 30yrs  
Gender: Female  
Race: Indian  
Referring Physician: Mediwheel HCU  
Attending Physician: Dr. Vimmi Goel  
Technician: --

### Medications:

--

### Medical History:

NIL

### Reason for Exercise Test:

Screening for CAD

### Exercise Test Summary:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:07	0.00	0.00	73	110/70	
	WARM-UP	00:20	0.00	0.00	80		
EXERCISE	STAGE 1	03:00	1.70	10.00	127	110/70	
	STAGE 2	03:00	2.50	12.00	146	120/70	
	STAGE 3	00:36	3.40	14.00	169		
RECOVERY		01:00	0.00	0.00	122		
		02:00	0.00	0.00	91	120/70	
		01:08	0.00	0.00	82	120/70	

The patient exercised according to the BRUCE for 6:36 min:s, achieving a work level of Max. METS: 8.80. The resting heart rate of 81 bpm rose to a maximal heart rate of 169 bpm. This value represents 88 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 120/70 mmHg. The exercise test was stopped due to ST-T changes seen.

### Interpretation:

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: ST-T changes seen.

Overall impression: Borderline Positive.

### Conclusions:

TMT is Borderline Positive for inducible ischemia. by ST-T changes seen during peak exercise.

No angina.

To be correlated clinically.

**Dr. VIMMI GOEL**  
MBBS, MD  
Sr. Consultant-Non Invasive Cardiology  
Reg.No.: 2014/01/0113

MR NEHA PATKE  
Female

09-Sep-23 9:50:06 AM  
KIMS-KINGSWAY HOSPITALS  
PBC DEPT.

30 Years

Rate 74 . Sinus rhythm.....normal P axis, V-rate 50- 99

PR 151  
QRSD 81  
QT 381  
QTc 423

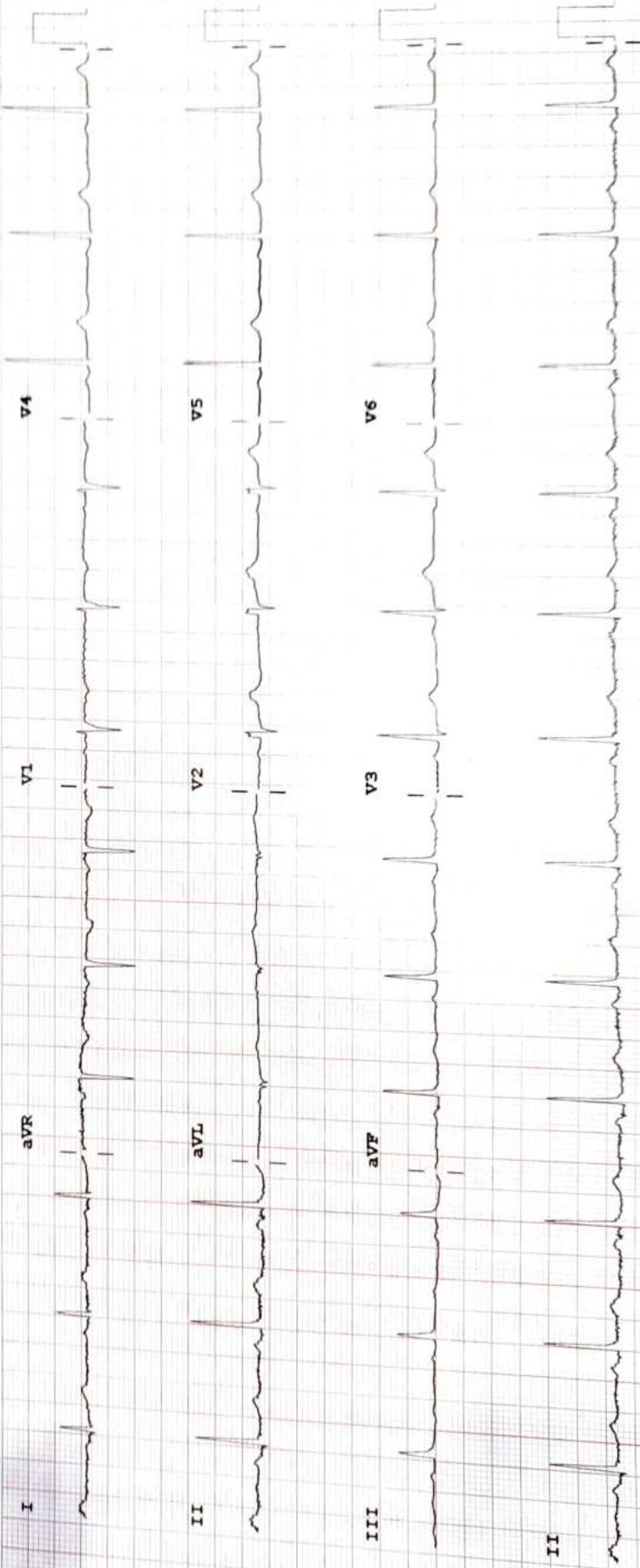
--AXIS--

P 48  
QRS 67  
T 16

12 Lead; Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W 100B CL

P?